PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

AVERP3525USB.

(Column 1) (Column 2)								SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			(Column 1)		(Column 2)]	TYPE		OR	<u> </u>	ENTITY	
			20			<u>. · </u>		RATE	FEE		RATE-	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			₩ minus 20=		• . 0			X\$ 9=		OR	X\$18=	0	
INDEPENDENT CLAIMS			Ψ minus 3 =		. /			X43=		OR	X86=	86	
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=	O	
* If	the difference	e in column 1 is	less than zero, enter "0" in o			column 2		TOTAL		OR	TOTAL	85/2	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
_	,	(Column 1)	,	(Column 2)				SMALL	ENTITY	OR	SMALL		
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	·	OR	X\$18=		
	Independent	*	Minus	***	CLAINA	=	$ \cdot $	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)	<u>.</u>	(Colum	n 2)	(Column 3)					ADDII. I EE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X43=		OR	X86=		
	PIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=		
						٠		TOTAL		OP	. TOTAL		
	•	(Column 4)	(0-1,0)				Al	DDIT. FEE L			ODIT. FEE		
AMENDMENT C	•	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	·	(Colum HIGHE NUMB PREVIOU PAID F	ST ER USLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent		Minus	***	j	=		X43=			X86=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							743-		OR	A00=		
• 14	the entry in colum	nn 1 ie laen than th	omtovia aat	6		0	Ŀ	+145=		OR	+290=		
H	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								•	OR A	TOTAL DDIT. FEE		
· T	he *Highest Num	ber Previously Paid	For" (Total or	Independen	iess than it) is the f	is, enter '3." highest number	found	in the appr	opriate box				